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Press Briefing Transcripts

Thursday, MAY 03, 2007, 12:00 p.m.

OPERATOR: The briefing will begin momentarily; our speaker today is Dr. Julie Gerberding, CDC Director. As she makes her way to the podium you will room noise from the auditorium or silent moments until she begins.

We would like to remind you if you would like to ask a question during the call, please press star one on your touch tone phone. If you would like to withdraw your question, please press star 2. As a reminder if you're on a speaker phone, please pick up your handset before registering your question.

All participants are in a listen only mode until the question and answer segment. This call is being recorded. If you have any objections please disconnect at this time. Please stand by, thank you.

JULIE GERBERDING, DIRECTOR, CENTER FOR DISEASE CONTROL: Thank you so much for joining us for this press briefing. Today we're announcing some new advice from CDC about the use of face masks and respirators during influenza pandemic.

These guidelines will be available on the CDC web site and also on the Government's web site www.pandemicflu.gov which is a wonderful resource for people to find out everything they need about preparing for pandemic.

What we're hoping to be able to today is to inform people about the kinds face protection that might be helpful for protecting people in non occupational settings during a pandemic. We know that many times people will want to wear a mask, if they think they are going to be exposed to infectious disease as we certainly saw that during SARS and it's kind of human nature to want to try and protect yourself.

We wish we had better science to help people prepare. And we are doing the kinds of research studies that are going to give us a lot better information. But those results aren't going to be available for quite a few months and possibly even a couple of years in some cases.

And so we didn't want to wait and decided that right now the best thing for us to do would be to use some common sense and to gather the best experts that we could to create some practical advice for people who are preparing for a pandemic. And give them some help in making decisions about how to protect themselves and their families.

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A face mask is the kind of mask that you see surgeons where in the operating room if you're someone who's either in an operating room or you're watching soap operas you'll often see the surgeons have this kind of face mask on.

It's just an expansive piece of material that goes across the nose and mouth. And think of it as the way that we sort of catch and contain respiratory secretions. So if you're coughing, sneezing or sometimes even talking droplets come out of your mouth and these kinds of masks are very good catchers of those droplets and so they keep your secretions contained within you.

And prevent them from going on to expose other people. Another kind of more sophisticated mask is called a respirator. Particularly in our guidance we're talking about something known as N95 respirator.

These are very specially engineered facemasks that are designed to filter out about 95 percent of the particles that might be moving toward your breathing zone when you're breathing in air. These masks remove very, very small particles and prevent you from inhaling things that are the size of a virus.

The problem with a respirator is that if there's any gap between the respirator fitting to your face and your face itself, air is coming in around the mask so its filtration obviously isn't 95 percent; it drops down to something that would be more like the kind of face mask I described in the first place.

So N95 respirators are most useful for people who have direct contact with those who actually are sources of virus. From patients or if you're caring for someone at home and you have to be in the breathing zone of that person, an N95 respirator, if it fits perfectly can really help you from breathing in virus from the outside.

So again we have face masks that catch and contain your secretions and keep you from contaminating someone else and N95 respirators which if fitted properly will reduce the chance that you will inhale a virus from somebody else who's shedding it.

So if you really are in a situation like a healthcare worker, where you know you would be in contact with people who are sources of virus knowing how to use a N95 respirator makes sense.

And some people may choose to have this kind of respirator at home so in case they're in a situation where they're taking care of a sick family member, they'll have that kind of protection on hand as well.

The downside of N95 respirator, first of all, costs more, second, because it does fit so tight, it sometimes makes it hard for people to breathe. And people who have to wear them for long periods of time or people who have lung problems often can't a wear a mask like that.

Because it increases the work of breathing and you just simply can't breathe normally and then you defeat the whole purpose of wearing one. The other disadvantage of an N95 mask is for people who have beards; it's just about impossible to get the mask to fit tight enough to your face to be that kind of effective filter.

So they are not for everyone and they have a very limited role in pandemic planning. But some people are interested in having them and we wanted to help people understand how they need to be used, how they can be used in certain situations, and this is why we make a distinction between an inexpensive facemask and this more complicated N95 respirator.

We know that again, none of these face masks are going to protect people completely so you do need to take additional steps of prevention. Avoiding sick people, avoiding crowds, staying home if you are sick and if you have to be in a crowded environment wearing a facemask to prevent your respiratory secretions from contaminating someone else really makes sense.

People can now buy these kinds of masks in the grocery stores and in a variety of other places. Some people already have them, and this might be a good chance as you're planning to prepare yourself and your family for a pandemic to get one and check it out. Just

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And just as a reminder of what that includes, it includes your food and water supply for up to two weeks, your medications, your pet food and water as well as any pet medications. Some materials that you need to be able to run your radio without electricity and the other kinds of things that can be found on the web site to assure your family can take care of itself, not only in the flu pandemic, but in any kind of disaster emergency that might occur in your community.

So please check out our internet and if you don't know where else to look for information you can also find really good information about home preparedness on the Red Cross web site. There are wonderful resources available to everyone and we always want to respect and appreciate the many partners in preparedness in communities across our nation.

So let me stop here and take some questions and I'll start with the question from the telephone please. Can I have the first question?

OPERATOR: Helen Branswell, the Canadian Press, your line is open.

HELEN BRANSWELL, CANADIAN PRESS: Thank you very much. Dr. Gerberding, hi. Thanks for doing this. If you had released or the CDC this a year ago or 18 months ago, I think there would have been a run on masks and N95, today I'm not sure if this won't be just greeted with kind of a yawn.

I'm wondering if you think that the level of pandemic anxiety has sort of found a more comfortable and sensible medium or if you are concerned that people may now think that the risk has passed or that the risk never really existed in the first place with H5N1.

DR. GERBERDING: Let me start with the second part of your question because we are concerned that people are becoming complacent or have removed their focus on the possibility of a pandemic. I think that's very dangerous. We know that a pandemic will eventually occur. We always say it's not a question of if; it's a question of when.

There is nothing about the H5N1 bird flu right now that's offering us any reassurance compared to where we were last year and in fact we have some ongoing concerns about the way that virus is evolving.

But if it's not H5N1, there are still many other possibilities so we urge people to take preparedness for a pandemic seriously, but in a sense we're also glad that as we've talked more about it and as people are beginning to kind of take their own preparedness into their own hands, that it's beginning to feel more manageable. It's less frightening. People are more action oriented.

They are more thoughtful about their decisions and this really is a good time to be thinking about masks because people - many people are at a point where they have looked around and done some of the things they need to do to prepare.

But this is always one with a big question mark and we've been, I think, waiting to some extend to try to get the science that we like to have before we issue firm guidelines. But we recognize that people will make decisions for themselves based on their own common sense and that's bound to be an important part of that so we wanted to get this information out and just add one more tool to the toolkit of things that people can do to prepare. I can take another telephone question please.

OPERATOR: Richard Knox, National Public Radio, your line is open.

RICHARD KNOX, NATIONAL PUBLIC RADIO: Hi, thanks very much.

A couple of things, I know you mentioned that you are not advising Americans to start stockpiling masks and respirators, but there are lots of businesses out there that are trying to figure out what they could be doing now and I wonder how they should be reacting to today's advice. Maybe buying these things in bulk for their employees. Along the same lines, I wonder what studies - could you describe what you're doing to try to pin down the science of mask protection?

DR. GERBERGING: Sure. You know, employees really have to take the same kind of approach that we're recommending for our citizens

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So scientists in a variety of different academic environments are trying things like what happens in college dormitories if one dormitory has students that are given masks in addition to advice about hand washing versus dormitories where students are given the hand washing and the advice, but not necessarily encouraged or asked to consider using mask if they get a respiratory illness.

So during flu season we'll be able to learn something about which groups of students were more likely to develop respiratory disease or missed days at school and so forth. There are other kinds of studies going on in more artificial environments where, for example, people could be exposed to the kind of flu virus that's in the FluMist vaccine with or without a mask, and then check to see whether or not their exposure was sufficient to resolve in immunization or development of the kind of infection that this vaccine creates that causes the immunity.

So those are the kinds of studies, both sort of laboratory experiments as well as social experiments to get real-life experience as well as more background experience with how can masks be used and do they really work to prevent exposure.

Of course one of the things that we have the most uncertainty about is why does the distance of exposure that results in transmission - that's going to be a really hard question for us to completely define as there are so many other variables that influence exposure. But that's something that we'll be trying to be more precise on as we do some of these experiments as well.

A lot to learn but a lot of creativity and innovation. And we'll take advantage of all this good energy and synthesize it as it comes in to any updates that are needed in our current recommendation.

I can take a question in the room.

LORI TURNER (ph), ASSOCIATED PRESS: Lori Turner (ph) with the Associated Press. I'm wondering, you know, you have this image in your head of people in Asia wearing the mask sort of during the SARS outbreak. And I'm wondering, obviously with these guidelines you all are recommending the masks, plus a battery of other things to do.

Do the masks create sort of a sense of false comfort for people who are out there? Is that a concern of the CDC?

DR. GERBERDING: We are concerned that people will think the mask is the magic bullet, just like sometimes they think that the vaccine will be the magic bullet and that we'll have it in time at the beginning of an outbreak.

I think masks are certainly something that can have a role in personal protection, but they are not the most important thing, nor are they necessarily even essential to personal protection. And it is important that we not forget the other stuff, again to avoid crowds during a pandemic, to stay home if you're sick and to do everything you can to stay away from people who are ill with respiratory illness during that contact.

Those are equally important measures, and probably at this point in the science more important than anything else that we can say about masks and respirators. But having said that, you know, we also recognize that each one of us has to make our own risk equation about how we will want to protect ourselves.

And you just can't help but appreciate that having that piece of material between you and the air around you could offer an extra margin of safety. And that's why we're trying to help people frame that decision with the best possible information that we have.

Another thing about masks that we need to emphasize is that if they don't fit right, or if they're uncomfortable, it actually increases the likelihood that people will touch their eyes or their nose. And since you can introduce flu virus by touching someone or something that's contaminated and then inoculating yourself in your eye or your nose, if masks increase the chance that people will be touching their face, it could paradoxically increase your exposure.

So hand washing has to be another very important part of all of the steps people need to take to protect themselves. And it should be washing hands frequently regardless of flu season. But during flu season it's especially important, and to do everything possible to

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What we currently have in our stockpile, the regular surgical masks that I mentioned, we have almost 52 million of those. And of respirators that are certified as N95 respirators, we have almost 100 million of them in the stockpile with several million more on order.

I wanted to clarify for those who aren't familiar with respirators that when we say certified we mean that the National Institute for Occupational Safety and Health has examined the mask under very stringent laboratory conditions, and has demonstrated that when worn properly the mask does really achieve that 95 percent filtration effectiveness.

So if you're looking for which mask to buy, get one that says NIOSH certified, because that is a mask that will give you the assuredness that if you can wear it properly it can protect you. We are not done purchasing masks yet, and we will continue to look at what we expect the states might need and what our supply might be.

I should also emphasize that part of the investment that the President and the Congress have made in emergency flu-preparedness is to try to accelerate development of new technologies and new masks.

For example, we'd love to have a mask that easily fits everyone tight to the face without having to go through the kind of formal process of demonstrating fitness that we generally recommend for a respirator.

So there are some exciting new prospects in the pipeline, and we hope both things can come out of the advanced development process as quickly as they can, because that will give us more tools to protect people and also protect health care personnel and others who will be in the direct line of patient care.

I can take another telephone question.

Operator: Ambrose (ph) from Sidrap (ph) News, your line is open.

AMBROSE, SIDRAP (ph) NEWS: Thank you. Yes. I was wondering about the aspect of fit testing? What would you tell the public about how to take a respirator - how to find a respirator that fits?

DR. GERBERDING: In general terms fit testing, when done according to NIOSH standards is something that it will be very difficult for someone to easily do at home. However we are looking at ways that people might be able to learn to do a good enough fit test at home to get some idea that at least the mask is not fitting properly.

And so we'll be experimenting along with others at the FDA and other organizations to see whether or not it might be possible to really help people choose a N95 respirator and get it to fit as tightly to their face as they can.

In health care settings, of course, that's done with professionals who are trained in the analysis of fitness, and that's one of the reasons why using N95 respirators is controversial, because it isn't easy for everyone to do this at home, nor is it necessarily a good idea.

This is another one of those cases where a false sense of security could creep in. If people think oh, I'm safe, I'm wearing a N95 respirator, but it doesn't fit right, you might as well not be wearing anything. And so we have to do more work to really figure out what's the best way to assure that people who think they need that kind of respirator have one that at least fits.

You know, in some sense, if you're going to choose a mask right now, it probably makes sense to think about a face mask as the most important [of both] - a simple face mask that helps protect your respiratory secretions from contaminating anyone else.

But if you for some reason had to go in a crowded situation, let's say you had to go the grocery store and you also wanted to protect yourself from the droplets of the person who sneezed next to you in the line, you can also wear a simple face mask and you'd catch the droplets on the other side of the mask. And that might be an extra margin of safety as well.

We're not really sure what role the N95 respirators will play in protection except for the situations when you're actually providing the kinds of direct care that a health care worker would be providing to a patient in a hospital environment.

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